



UNIVERSITY
of York



Applied Mental Health Research at York

RESEARCH AT YORK

CREATIVITY

CULTURE & COMMUNICATION

ENVIRONMENTAL SUSTAINABILITY & RESILIENCE

HEALTH & WELLBEING

JUSTICE & EQUALITY

RISK, EVIDENCE & DECISION MAKING

TECHNOLOGIES FOR THE FUTURE

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Introduction

Mental ill-health is one of the main causes of disability in the UK and around the world. In the UK, up to one in four adults and one in ten children may have a mental health problem in any year, with costs likely to exceed £100 billion. People with severe mental illness experience substantial inequalities in access to and outcomes from health care, and their life expectancy is reduced by around 25 years. The human, social, and economic costs of mental illness are profound.

The University of York has a strong portfolio of research addressing the challenges of mental ill-health. We develop and apply innovative methods to make a difference to care at all levels: from the local York community and the University's own students and staff, to national and international policy and practice.

Our research is not restricted by traditional disciplinary boundaries. We address real world problems, including the complex causes of mental health problems, and the interaction between mental and physical health. We work across the life course, and at all levels of severity of illness, from promoting population mental health and preventing problems, through common mental health disorders to severe mental illnesses. To do this, we draw on the expertise of a wide range of skills and disciplines, working together to design, refine and apply new interventions to improve mental health. Many researchers are international leaders within their methodological fields, but also active clinicians. Close collaborations exist between the University of York, the Hull York Medical School, local and national NHS services and other public sector and voluntary organisations. Our innovative research is demand-led and evidence based, with a clear focus not only on effectiveness of interventions, but on cost-effectiveness and the equitable delivery of care.



The research environment at York empowers all researchers to seek advice from any colleague and consequently novel collaborations flourish. Our research strategy builds on this tradition, with seven cross-cutting Research Themes, all of which may include mental health activity: Creativity, Culture and Communication, Environmental Sustainability and Resilience, Health and Wellbeing, Justice and Equality, Risk, Evidence and Decision Making and Technologies for the Future.

In this brochure, we present examples of our applied mental health research, which cuts across disciplines and works across the human lifespan. There is no health without mental health, and research in this field is a strategic priority for the University of York. Our aim is to produce methodologically excellent research which informs practice and policy to improve the mental health of populations and people who use the mental health services.



Acknowledging our funders

The breadth of our research is reflected in a rich and diverse set of external partners and funders, including substantial funding from the National Institute for Health Research, as well as the UK Research Councils, government departments and health research charities.

Applied psychology and psychiatry

PARENTING, CHILDHOOD & DEVELOPMENT

Researchers at York develop and apply methods from psychology and psychiatry to solve real world problems, across the life course.

Experiences in the early years are increasingly believed to play a large role in determining future mental health. York research includes a focus on attachment and how parents 'tune in' to young children's thoughts and feelings, as well as investigating various aspects of children's development and wellbeing. Research is child-oriented, focusing on producing and evaluating

interventions that are age-appropriate and address the needs of children and young people affected by, or at risk of, mental health problems.

Considerable uncertainty remains about how to promote wellbeing in childhood and how to prevent future mental health problems. At York, interventions, for example to improve parenting skills and to promote emotional wellbeing in schools, are designed, refined and evaluated using robust methods including randomised controlled trials.



CASE STUDY

Using social stories in schools to help children with autism spectrum disorders

A Social Story™ is a child-friendly intervention that gives children with autism spectrum disorders social information in situations where they have social difficulties. They may be able to reduce anxiety and challenging behaviour. Professor Barry Wright and colleagues conducted a systematic review, qualitative study and a feasibility trial, to develop and inform the development of further research on the clinical and cost-effectiveness of this approach in schools.

Reference

Marshall D, Wright B, Allgar V, Adamson J, Williams C, Ainsworth H *et al.* Social Stories in mainstream schools for children with autism spectrum disorder: a feasibility randomised controlled trial. *BMJ open.* 2016 Aug 1;6(8):e011748.

Applied psychology and psychiatry

WORKING AGE ADULTS

Common mental health disorders, such as depression and anxiety, cause substantial distress to many people and create large demands on NHS and other services. At York we have a substantial research programme addressing these problems, including evaluation of the clinical and cost-effectiveness of brief psychological therapies. Researchers use randomised trials, evidence syntheses and statistical analysis of large routine-practice datasets.

People with severe mental illness frequently have long-term physical health problems, and have much reduced life expectancy compared with other sections

of the population. Diabetes, for example, is 2-3 times more common and has poorer outcomes for people with severe mental illness. Smoking is the major cause of avoidable mortality and poverty, and the prevalence of smoking is much higher for this group. People with severe mental illnesses are, however, far less likely to access smoking cessation or health promotion services. Researchers at York focus on the interface between mental and physical health, designing and evaluating interventions to address these major health inequalities, targeting unhealthy behaviours and also problems in accessing good health care and managing long-term physical health problems.



CASE STUDY

Can we treat depression by computer? The REEACT trials

There is increasing interest in the delivery of cognitive behavioural therapy via computers (cCBT) to increase access to treatment. Existing research has generally been conducted by researchers who also developed the programmes, which is potentially problematic. Professor Simon Gilbody and colleagues at the York Trials Unit (YTU) have conducted the largest ever rigorous studies in this area - the REEACT trials - studying the clinical and cost effectiveness of cCBT and the level of support which is needed to support it. They found that the cCBT as delivered in the NHS is unlikely to result in improved outcomes for people with depression, and that structured support over the phone results in increased use of cCBT and reduced levels of depression and anxiety. This will inform NICE guidance and future NHS practice.

Reference

Gilbody S, Littlewood E, Hewitt C, Brierley G, Tharmanathan P, Araya R *et al.* Computerised cognitive behaviour therapy (cCBT) as treatment for depression in primary care (REEACT trial): large scale pragmatic randomised controlled trial. *BMJ*. 2015 Nov 11;351:h5627.

Applied psychology and psychiatry

OLDER PEOPLE

Depression is thought to affect one in five older people living in the community, and two in five living in care homes. The causes of this are complex, and may include physical health problems, loneliness and social isolation, caring responsibilities, stopping work, bereavement and changing family circumstances.

York researchers explore various aspects of the wellbeing and mental health of older people, including evaluating support for carers of people

with dementia, links between isolation and use of health services, and improving health care for older people with mental health problems, from mild symptoms to major depression.



CASE STUDY

Integrated primary care of older people with depression

Led by Professor Simon Gilbody of the Mental Health and Addictions Research Group in collaboration with the York Trials Unit, CASPER is the first large-scale UK study into the integrated primary care of older people with depression. A system of 'collaborative care' was developed, including a case manager to provide information and support, liaise with primary care, support activity-focused interventions, and help individuals to identify ways to keep well in the future based on simple evidence-supported psychological approaches. York researchers found that collaborative care reduced symptoms, prevented deterioration of depression and was good value for money.

Reference

Gilbody S, Lewis H, Adamson J, Atherton K, Bailey D, Birtwistle J *et al.* Effect of collaborative care vs usual care on depressive symptoms in older adults with subthreshold depression: the CASPER randomized clinical trial. *JAMA*. 2017; 317(7):728-737. doi:10.1001/jama.2017.0130.

Social epidemiology

MATERNAL MENTAL HEALTH

Our society and environment affects our mental and physical health. York epidemiologists are helping to unravel the complex factors that contribute to the high incidence of mental health problems in people who are socially disadvantaged.

Using methods including reviews, modelling, cohort studies and analysis of observational data we explore the patterning of mental health problems by factors such as poverty, age, deprivation and minority ethnicity, any of which can limit people's ability to take full advantage of resources that help to keep us healthy.

Working with the Bradford Institute for Health Research, Professor Kate Pickett and other York researchers are part of the 'Born in Bradford' (BiB)

research team. This cohort study tracks the health and wellbeing of 13,500 children born between 2007 and 2010, from pregnancy, through childhood and into adult life, including research on parenting, maternal depression and varied aspects of physical and mental health. We are looking forward to future developments including a new survey of the whole group of children and their social and emotional development, and a new cohort, Born in Bradford Better Start, which will use sophisticated study designs to assess the effects of interventions on children's well-being. Researchers at York are also involved in the Born and Bred in Yorkshire: perinatal depression diagnostic accuracy study (BaBY PaNDA), which aims to improve the diagnosis of maternal depression in the early postnatal period.



CASE STUDY

Ethnic and social disparities in detection of anxiety and depression in primary care

Most episodes of anxiety and depression are managed in primary care, but GPs often fail to detect these illnesses. Dr Stephanie Prady and colleagues used linked cohort and administrative data from the Born in Bradford study to explore the social patterning of depression and anxiety in women during and after a pregnancy. They found that overall, up to half of cases of anxiety and depression were potentially missed by GPs, and that minority ethnic women were only half as likely as White British women to have had a screening test and more than twice as likely to have problems undetected. Across all ethnic groups, lower socio-economic status was associated with increased risk of having a common mental disorder, whether detected or undetected.

Reference

Prady SL, Pickett KE, Petherick ES, Gilbody S, Croudace T, Mason D *et al.* Evaluation of ethnic disparities in detection of depression and anxiety in primary care during the maternal period: combined analysis of routine and cohort data. *The British Journal of Psychiatry.* 2016 Jan 21;bjp-p.114.158832.

Addiction

PUBLIC HEALTH INTERVENTIONS

Addiction problems cause avoidable suffering to individuals, their families, community and society. In health, social and economic terms, the burden of addiction has largely worsened in recent decades in the UK and around the world. Alcohol, drugs, tobacco and gambling are all public health problems contributing substantially to health inequalities. It is important to better understand the nature of these problems, and inform evidence-based responses.

Researchers in the Mental Health and Addiction Research Group and the Public Health and Society Group at York seek to develop the evidence base for prevention and treatment of addiction at individual and population levels, and promote the use of evidence by policy makers. This includes work on prevention and treatment of addiction in low and middle income countries, particularly studies to reduce tobacco use in South-East Asia.



CASE STUDY

Helping smokers with tuberculosis to quit

Tuberculosis (TB) and tobacco use are considered to be two “colliding epidemics” that lead to millions of deaths each year. Patients with TB who smoke deteriorate more rapidly and have a higher risk of death. As much as 20% of the total disease burden from TB is attributable to tobacco use. Professor Kamran Siddiqi and colleagues, in a trial of smokers with TB, found that behavioural support, with or without addition of smoking cessation medication, was more effective than usual care to achieve tobacco abstinence.

Reference

Siddiqi K, Khan A, Ahmad M, Dogar O, Kanaan M, Newell JN, Thomson H. Action to stop smoking in suspected tuberculosis (ASSIST) in Pakistan: a cluster randomized, controlled trial. *Annals of Internal Medicine*. 2013 May 7;158(9):667-75.

Addiction

BEHAVIORAL INTERVENTIONS

To reduce the harm caused by addiction, we need better understanding of the nature of alcohol, other drug and other addictive behaviour problems, and what we should do about them. This includes studying how problems develop in individuals, as well as how they can be helped.

Researchers at York design and conduct randomised controlled trials evaluating behaviour change interventions, to help people to lead healthier lives. For example, brief interventions can be

offered to individuals in health care and other settings to help prevent or resolve problems before they become entrenched and more difficult to change. We aim to develop the evidence base for prevention, and promote its use by policy makers. This includes investigating the actions of large corporations for whom addictive consumption is profitable, particularly scrutinising how they involve themselves in evidence informed policy making.



CASE STUDY

Brief interventions for addictive behaviours

Alcohol is responsible for approximately 6% of all deaths worldwide every year. As well as policy measures, WHO recommend “brief interventions” for individuals who drink heavily when they are in routine contact with health services. These are ways of helping people to think about whether and how to change, and they can be applied at scale to the numbers who may benefit, and may also be offered to other drug users. Professor Jim McCambridge and colleagues have recently developed studies exploring the effectiveness of brief interventions for people with alcohol problems in new healthcare settings such as community pharmacies, undertaking the first randomised controlled trial of this in the scientific literature.

Reference

Dhital R, Norman I, Whittlesea C, Murrells T, McCambridge J. The effectiveness of brief alcohol interventions delivered by community pharmacists: randomised controlled trial. *Addiction*. 2015;110(10):1586-94.

Mental health in society

MENTAL HEALTH AND CRIMINAL JUSTICE

Around twenty per cent of police time is spent dealing with mental health issues, but police officers often have very limited training in dealing with these problems. This can result in people ending up in the criminal justice system rather than receiving proper care. Led by Professor Martin Smith, in collaboration with North Yorkshire Police, the College of Policing and Tees Esk and Wear Valleys NHS Foundation Trust, a York research programme (Connect, see <http://connectebp.org>) is building evidence and delivering and evaluating a bespoke training programme on mental health to police officers and police community support officers.

In recent years drug treatment services have increasingly focused on 'recovery' outcomes. Researchers in the Mental Health and Addiction Research Group explore how people with substance use problems and other complex needs are best supported and helped, adopting a holistic definition of the word 'recovery', not simply abstinence from substance use. The research team are particularly interested in the treatment that prisoners with drug and/or alcohol problems receive and how they can be helped to manage the difficult transition from prison to the community. Research is also conducted on the extreme stigma associated with

problem drug use and how such stigma acts as an obstacle to social integration and life chances.



CASE STUDY

Delivering drug recovery services in UK prisons

In 2011, ten pilot 'Drug Recovery Wings' were introduced in prisons in the UK. Charlie Lloyd and colleagues explored how these wings operate in practice, the place of opiate dependent prisoners within them, and the challenges of delivering 'recovery' in prison.

Reference

Page G, Templeton L, Grace S, Roberts P, McKeganey N, Russell C, Liebling A, Kougiali Z, Lloyd C. Conspicuous by their abstinence: The limited engagement of heroin users in English and Welsh Drug Recovery Wings. *International Journal of Drug Policy*. 2016 Mar 31;29:49-56.

Mental health in society

SOCIAL POLICY AND SOCIAL WORK

Mental health problems affect and are affected by many areas of life. A wide range of public and private sector agencies outside the health system provide mental health care, including children's services, schools, employers and local authorities, all of which are informed by York research. The Centre for Housing Policy has explored the impact of homelessness on the mental health of children. The Social Policy Research Unit (SPRU) has undertaken research on the mental health of children and young adults with disabilities, for example autism spectrum disorders. At the other end of the life course, researchers in SPRU are developing a research programme on support for carers of people with dementia, who are at particularly high risk of developing anxiety and depression.

Social work researchers in York are involved in projects involving looked after children, with the aim of improving longer-term outcomes. This research informs the critical decisions that social workers have to take about whether to remove abused and neglected children from their parents, and whether to return them home.

Based in the Department of Social Policy and Social Work, the International Centre for Mental Health Social Research brings together researchers from

around the world to apply social science to mental health practice, researching factors which help to enhance mental well-being and support recovery from mental distress. This includes research in Sierra Leone (the Connecting People project, see <https://youtu.be/XIXSQMNldF8>) investigating whether introducing community based psychosocial approaches - treatments which do not require medication - could improve care and decrease the stigma of mental health.



CASE STUDY

Outcomes for looked after children reunified with their families

Professor Nina Biehal and colleagues explored decision-making around reuniting children in care with their families and the outcomes of these decisions for 149 maltreated children in seven English local authorities, using information from case files and surveys of social workers and teachers. Around half the families were affected by substance misuse, and a quarter by mental health problems. The research found that outcomes were generally better for children who remained in care than for those who returned home.

Reference

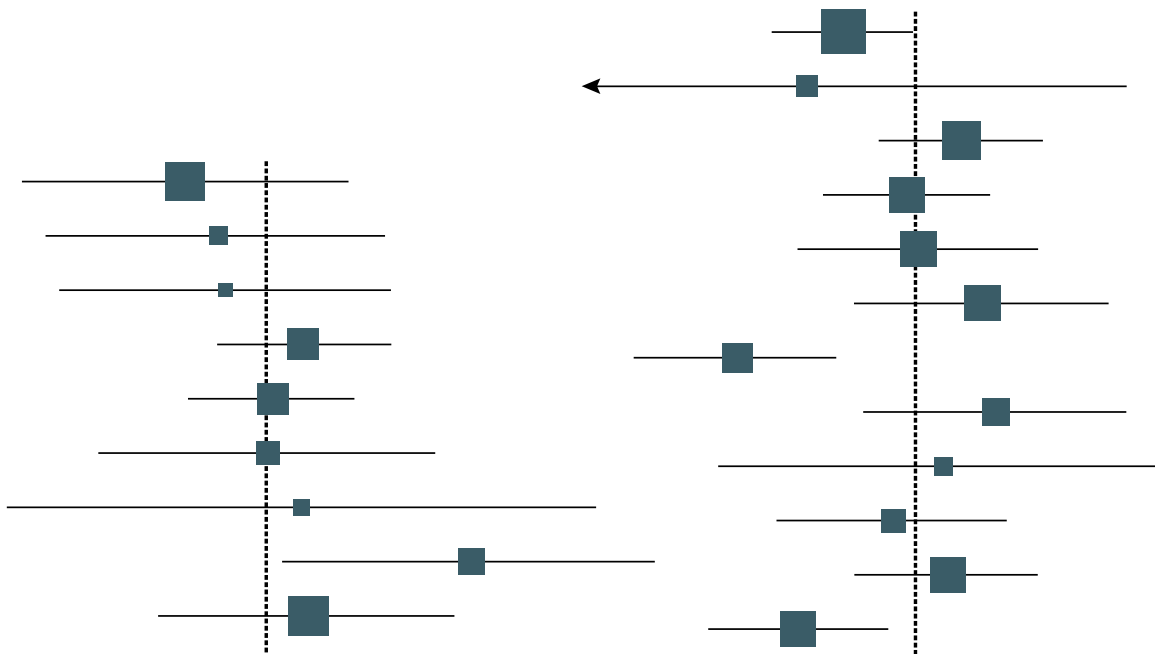
Biehal N, Sinclair I, Wade J. Reunifying abused or neglected children: decision-making and outcomes. *Child Abuse and Neglect*. 2015 Nov 30;49:107-18.

Evidence synthesis

SYSTEMATIC REVIEWS IN MENTAL HEALTH

The Centre for Reviews and Dissemination (CRD) specialises in evidence synthesis, assembling and analysing data from multiple research studies and has, over the last 20 years, undertaken around 200 high quality, systematic reviews and associated economic evaluations. The Centre develops and uses innovative methods that help address important questions arising in health care, often involving complex methodological approaches such as network meta-analyses, diagnostic test accuracy

reviews, and the use of individual participant data. CRD has undertaken numerous reviews of topics related to mental health, including the diagnosis of, and interventions for, depression and other mood disorders, anxiety disorders, alcohol and drug addiction, severe mental illness, mental and physical comorbidity, dementia, the mental health of offenders and public mental health, as well as issues affecting the provision and delivery of mental health services.



CASE STUDY

Exploring the effectiveness of collaborative care for depression

Collaborative care is an intensive care model involving several health care professionals working together, typically a physician, a case manager, and a mental health professional. Previous studies have shown that collaborative care is particularly effective in people with depression and comorbid chronic physical conditions, and existing NICE guidance recommends that it is limited to this patient group. Researchers at CRD and around the world used individual patient data (IPD) meta-analysis to determine the effectiveness of collaborative care. They found evidence that collaborative care is effective for people with depression and chronic physical conditions, but also for people with depression alone.

Reference

Panagioti M, Bower P, Kontopantelis E, Lovell K, Gilbody S, Waheed W *et al.* Association Between Chronic Physical Conditions and the Effectiveness of Collaborative Care for Depression: An Individual Participant Data Metaanalysis. *JAMA Psychiatry.* 2016 Sep 1;73(9):978-89.

Evidence synthesis

COCHRANE COMMON MENTAL DISORDERS GROUP

The Cochrane Common Mental Disorders (CCMD) Group is based at the University of York's Centre for Reviews and Dissemination. Part of the Cochrane Collaboration, CCMD works with authors from around the world to produce and disseminate systematic reviews of health care interventions for treating and preventing a range of mental health problems, including depression, anxiety, eating disorders, somatoform disorders and suicide. CCMD works with subject specialists on priority topics and, through them, has established a number of international satellites that focus on key populations

of interest, including child and adolescent mental health and people affected by suicide and self-harm. CCMD is currently working with other Cochrane groups, the Campbell Collaboration, Evidence Aid and the World Health Organisation (WHO) to establish a satellite specialising in global mental health to produce systematic reviews to inform mental health promotion, prevention and treatment interventions in low and middle income countries.



CASE STUDY

The effectiveness of Omega-3 oils for treating depression

N-3 polyunsaturated fatty acids (known as omega-3 oils) are found naturally in oily fish, some other seafood and some nuts and seeds. Previous small-scale studies have suggested these as a possible treatment for major depressive disorder, but a systematic review by Professor Rachel Churchill and colleagues found that there was insufficient evidence to recommend this.

Reference

Appleton KM, Sallis HM, Perry R, Ness AR, Churchill R. Omega-3 fatty acids for depression in adults. Cochrane Database of Systematic Reviews 2015, Issue 11. Art. No.: CD004692. DOI: 10.1002/14651858.CD004692.pub4.

Health economics

ECONOMIC EVALUATION

At York we lead many economic evaluations of interventions for the treatment of addiction and mental health problems. These have included interventions to promote smoking cessation, treatments for depression, alcohol problems, and long term modelling of healthcare costs associated

with the treatment of smoking related disease. Economists within the Mental Health and Addiction Research Group, the York Trials Unit and the Centre for Health Economics develop, refine and apply methods of economic evaluation alongside a number of randomised controlled trials in this field.



CASE STUDY

Cost-effectiveness of using nicotine patches to reduce smoking in pregnancy

Smoking during pregnancy is the most important, preventable cause of adverse pregnancy outcomes including miscarriage, premature birth, and low birth weight. These create large costs to the NHS. York researchers built an economic evaluation into a randomised trial of nicotine replacement patches for pregnant women who smoked. They found a slightly higher quit rate in women with nicotine patches, but with higher costs. Low compliance with the therapy reduced cost-effectiveness, but overall it is likely to be reasonable value for money for the NHS to provide nicotine patches to pregnant women who smoke.

Reference

Essex HN, Parrott S, Wu Q, Li J, Cooper S, Coleman T. Cost effectiveness of nicotine patches for smoking cessation in pregnancy: a placebo randomized controlled trial (SNAP). *Nicotine & Tobacco Research*. 2015 Jun 1;17(6):636-42.

Health economics

MENTAL HEALTH POLICY

Mental health problems represent a quarter of the national burden of ill-health, and are the largest single cause of disability and the leading cause of sickness absence in the UK. Mental health problems cost around £100 billion each year – including costs to individuals and society through lost working days, lost income, reduced quality of life, and treating preventable illness. Expertise at the Centre for Health Economics includes analysis of 'big data', with complex data linkage.

Their portfolio of research in mental health economics and policy contributes to a better understanding of: how socio-economic factors influence mental illness and vice versa; integration of and links between treatment and care quality in different parts of the health and care system, and how these affect health outcomes; and how to improve the organisation and funding of mental health services and the performance of mental health providers.



CASE STUDY

Does quality of primary care affect hospital admissions for serious mental illness?

Primary care is central to the provision of mental health care in England, and better integrated and co-ordinated primary care has potential to reduce hospital admissions and contain healthcare expenditure. Led by Professor Rowena Jacobs, two NIHR studies have investigated the relationship between measures of GP practice quality and NHS psychiatric hospital admissions. Surprisingly, the studies showed that better quality practices had more admissions for serious mental illness. The reasons for this are unknown, but one explanation is that these practices are better at identifying unmet need in their patients and at helping them to access hospital care when they need it. The findings have important implications for NHS budgets.

Reference

Gutacker N *et al.* Does the quality and outcomes framework reduce psychiatric admissions in people with serious mental illness? A regression analysis. *BMJ open.* 2015 Apr 1;5(4):e007342.

Interdisciplinary working

At the University of York we view an interdisciplinary approach as the core of our research. Researchers often need to cross disciplinary boundaries in order to tackle major global challenges, provide innovative solutions and promote an international perspective. Our research is focused around seven themes which align our academic strengths to best meet the grand scientific, social and environmental challenges of our time.

Mental health research at York is supported by an extensive network of excellent interdisciplinary research from across the Institution. For example, York's neuroscience community spans a large range of research - from atomic and molecular levels, through cognitive processing in whole living brains to the philosophy of consciousness and the theory of mind. The York Neuroimaging Centre was established in 2005, specialising in the investigation of human brain function using non-invasive imaging techniques. This interdisciplinary Centre was formed by a consortium of departments including Psychology, Computer Science, Electronics, Health Sciences and Chemistry. It has extensive links to the Hull York Medical School, to NHS clinical departments and to industry.

Researchers at York consider the social, economic and cultural factors which help to enhance mental well-being, and support recovery from mental distress. The International Centre for Mental Health Social Research (ICMHSR) brings together researchers from around the world to apply social science to mental health practice, focusing on social perspectives in mental health through the life course from childhood to old age.

Mental health research is also embedded within the Faculty of Arts & Humanities. The University of York's Centre for Global Health Histories (CGHH) is a WHO Collaborating Centre, part of the Department of History and a constituent member of the Humanities Research Centre. CGHH promotes inter-disciplinary research on themes of broad medical, scientific, environmental and public health importance including the history of mental health.



Partnerships

Partnerships are key to the creation, conduct, delivery and dissemination of our research, and to ensuring that research addresses real challenges and makes a difference to patients, the public, and service providers. We are committed to developing strong, lasting and diverse collaborative partnerships in mental health research. We work with patients and the public to determine priorities and support research, as well as with a variety of external organisations. Also, importantly within the University of York, research helps to support the mental health of our students and staff. Our links with NHS and other public services and voluntary organisations are extensive, and many of our researchers are practising clinicians. To fully consider the social, cultural, economic and political factors affecting likely uptake and implementation of mental health interventions we also partner with third sector organisations as well as local and national government organisations.

International partnerships

We have strong and developing links with researchers and health care providers around the world. Our collaborations in mental health research in low and middle income countries includes work in Bangladesh, India, Malawi, Nepal, Pakistan, Sierra Leone and Zimbabwe.

Mental health and the Collaboration for Leadership in Applied Health Research and Care (CLAHRC)

Yorkshire and Humberside, with its population of 6.2 million people, comprises one of the largest health-knowledge economies in the UK. The National Institute for Health Research Collaboration for Leadership in Applied Health Research and Care (NIHR CLAHRC) in Yorkshire and Humberside represents a partnership between the NHS and Higher Education Institutions, to improve patient outcomes through applied health research and evidence-based implementation.

A core theme of our CLAHRC is the co-existence of mental and physical ill health, led by Professor Simon Gilbody, Director of the Mental Health and Addictions Research Group at York. A flagship project has been a concerted effort to address the prevalence of smoking in mental health services by helping NHS Trusts to become smoke free and to enable staff and users of services who wish to give up smoking to fulfil this aspiration. The York led CLAHRC consortium has developed a bespoke smoking cessation intervention for people with severe mental ill-health, training over 100 NHS staff to deliver evidence-supported treatments. We led the largest trial of smoking cessation interventions ever under taken (the NIHR-funded SCIMITAR trial), and the results will inform practice and policy in the NHS.

The University is grateful to all our collaborators for their time, expertise and enthusiasm, and for their determination to work in partnership to improve mental health for all.

Future directions

Child oriented mental health interventions

The majority of adult mental health problems emerge in childhood and adolescence, and the impact of disorders can be mitigated by early treatment. Researchers in York have identified the need for interventions designed specifically to meet the mental health needs of children. This moves away from research that focuses on medication, neuroimaging, cognitive science or the tendency to borrow adult mental health interventions. Children often access help in different ways, and a key challenge is to harness different techniques to improve mental health and well-being. For example, Professor Barry Wright has recently been awarded an NIHR grant to carry out a randomised controlled trial of therapy facilitated by the use of LEGO® with children who have autism.

Life transitions and mental health

In taking a life course approach to mental health it is increasingly clear that life transitions are times of potential vulnerability to mental ill-health. A strategic priority at York is to study the impact of life transitions, such as between adolescence and adulthood, and between working age and retirement. We will develop effective interventions to mitigate problems, promote good mental health and reduce the risk of illness.

Reducing health inequalities for people with severe mental illness

In view of the major disparities in life expectancy experienced by people with mental ill-health, we will design and evaluate interventions that modify the impact of chronic diseases such as diabetes and cardiovascular disease for people who use mental health services. For example, in the York-led DIAMONDS programme we have developed user-centred self-management interventions for people with diabetes and severe mental illness (diamonds.nihr.ac.uk). This work is funded by the National Institute for Health Research and forms a flagship project in the NIHR CLAHRC for Yorkshire and the Humber.

Digital mental health

Digital technology has the potential to increase access to and effectiveness of mental health services. Researchers at York have a strong track record in pragmatic evaluation of digital mental health interventions, including delivery of computerised cognitive behavioural therapy, and using innovative virtual environment systems for psychological interventions to treat phobias and other psychological problems. Future challenges may be addressed by continued interdisciplinary innovation, for example by incorporating research on human computer interactions from the Department of Computer Sciences, and on gaming and mental health promotion in York's Digital Creativity Labs (DC Labs - digitalcreativity.ac.uk).

University of York facilities and services

Patient Case Management Information System (PCMIS)

PCMIS is an evidence-based Patient Case Management Information System designed by clinicians for clinicians for the management of high volume mental health caseloads through stepped and collaborative care models for common mental health and related problems. Integrated with patient portal, app and online eReferrals, PCMIS has powerful clinical tools that can identify and alert for clients at risk and not on track in their treatment regime, allowing services to improve quality of care. PCMIS is used by over 10,000 health care professionals, including NHS adult services, children's services, military veterans, student services, research trials, charities and commercial health organisations both in the UK and Australia.

Key Contact:

Byron George, IT manager and PCMIS Director
01904 321322
enquiries@pcmis.com
york.ac.uk/healthsciences/pc-mis

The York Health Economics Consortium (YHEC)

The University of York is world-leading in the field of Health Economics and Health Technology Assessment. The York Health Economics Consortium is a wholly owned subsidiary of the University providing consultancy to private and public sector providers of healthcare, including many leading pharmaceutical and medical device companies.

Key Contact:

Dr Matthew Taylor, Director
01904 323631
yhec@york.ac.uk
yhec.co.uk

The York Neuroimaging Centre (YNiC)

Established early in 2005, YNiC supports research in a number of departments of the University of York, as well as with external partners. The centre has invested extensively in technologies to help better understand the chemistry, physiology and psychology of human brain function. Facilities include 3-Tesla Magnetic Resonance Imaging, whole head magnetoencephalography, high density electroencephalography, transcranial magnetic stimulation and high performance parallel computing.

Key Contact:

Professor Tony Morland, Director
01904 435346
reception@ynic.york.ac.uk
ynic.york.ac.uk



University of York
campus

Working with the University

Research Partnerships

Stay ahead of the competition by working with University staff and facilities to develop and apply cutting edge research expertise, with the potential to secure joint funding through applications to UK and international bodies.

business@york.ac.uk

Consultancy

The University delivers a wide range of consultancy projects to support organisational development and growth.

business@york.ac.uk

Knowledge Transfer Partnerships

Employ a University graduate and get a grant subsidy to improve your competitiveness, productivity and performance by directly accessing the skills and expertise within the University.

ktp@york.ac.uk

PhD Studentships

Enhance your innovation capability and competitive advantage by funding a PhD student and gain access to the world-class expertise and facilities available at the University.

pg-admissions@york.ac.uk

Short Courses and Professional Development

Professional training courses, including part-time Masters degrees, certificates, diplomas, accredited and non-accredited short courses.

cpd@york.ac.uk

Philanthropy and Sponsorship

High profile opportunities to support world leading teaching and research.

oppa@york.ac.uk

Internships and Work Placements

Engage York students throughout the year via a range of flexible undergraduate and postgraduate work placements, internships and projects.

info@yorkinternships.co.uk

Business Innovation Reviews

Allows organisations to critically review new technologies and products under development in University departments.

business@york.ac.uk

Graduate Recruitment

Get the first pick of top quality graduates by participating in regular careers events.

careers@york.ac.uk

York Cares

Work with employers throughout the City to promote employee volunteering.

careers@york.ac.uk

York Award

Help students develop the skills your organisation will need in the future.

careers@york.ac.uk

Student Enterprise and Innovation

Support York student entrepreneurial activities through 'Apprentice' and 'Dragon's Den' style activities.

careers@york.ac.uk

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